

Worship for All Abilities Across Cultures

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Introduction: Worship for All Abilities in a Multicultural Society

In the US, we live in a multicultural society. Some of you may belong to a racial-ethnic congregation. Some of you may worship in a multicultural congregation. Even though your local church may not fit the traditional definition of a multicultural (multi-ethnic) congregation, cultural diversity in churches is increasing. It is becoming more frequent that individuals and families from minority cultures join the worship services of dominant-culture congregations.

People with special needs from culturally diverse backgrounds experience twice the discrimination experienced by non-disabled people in the minority community; both disability and race complicate the situation.

According to the National Ethnic Disability Alliance (NEDA) people with an intellectual disability, who are from culturally and linguistically diverse (CALD) backgrounds, will be highly likely to experience multiple forms of discrimination throughout their lives. They are likely to experience discrimination from the wider community due to their ethnicity and discrimination from both within their cultural group and the wider community due to their disability. In addition, due to factors such as poverty, unemployment, and poor health status, persons of minority backgrounds are at high risk of disability. According to the National Council on Disabilities, based on population projections, “the proportion of minority populations with disabling conditions will probably increase at even faster rates than that of the general population.”¹

This situation makes relevant that we design worship services for all abilities we may also consider some cross-cultural implications.

Universal Design in a Multicultural Society

Many elements already proposed as Universal Design for Worship work very well across cultures.

- Church buildings designed to function for people with varied abilities serve people from all cultures.
- Gluten-free choice of communion elements, serve people with gluten sensitivity from any culture. (By the way, if your Church allows bread substitutes, gluten free corn-tortillas, rice bread/crackers, tempeh bread, could be good options with cross-cultural witness)
- Designated fragrance-free area in the worship center, benefit individual from any culture with fragrance allergies or in chemotherapy.

¹ National Council on Disabilities, Meeting the Unique Needs of Minorities with Disabilities: A Report to the President and the Congress, 2001. <https://ncd.gov/publications/1993/April261993#6>, accessed 11/3/2017.

- Using the phrase “Please rise in body or in spirit” is inclusive of all people of all abilities in the congregation across cultures (obviously, we are talking about people from minority cultures who speak English)
- And the list goes on . . .

Short songs in Worship

But I’d like to point to other practice that we may consider as Universal Design for Worship, which also works well across cultures: the use of “short songs” in worship. “Short songs” are hospitable songs.

Different cultures have different orientations to time. There is a main distinction between monochromic (linear) time cultures and polychromic (cyclical or circular) time cultures. In linear time cultures, time is seen as tangible and sequential. They follow strict time schedules, focus on one task at a time and set deadlines that they aim to meet at all costs. In cyclical time cultures, perception of time is more fluid. Punctuality and structure are less important, and deadlines are seen as more flexible. In polychromic cultures, people use to work on multiple tasks at once.

Different time perceptions have implications for worship (E.g. Punctuality vs Flexibility; Strict order of worships vs Flexible/unstructured order of worship) and congregational singing.

Western classic hymnody has metered poetry structured in sequential stanzas expresses a linear understanding of time. In circular time cultures, people prefer to sing shorter songs. A brief song is usually 8 to 12 measures in length, and is repeated several times (cyclic form), sometimes with slight variations. Cyclic music also better represents oral cultures in contrast to literary cultures.²

Sequential-structured strophic hymns use many words. This may be hard for people of all abilities for whom English is their second language as well as for individuals of all cultures with certain disabilities (visual disabilities, learning difficulties, attention deficit, and others.)

Conversely, as Randall Bradley claims, “short songs, are usually more hospitable because they are easily accessed musically and content minimal texts, and because their repetitive nature makes them easy to memorize.”³

Including one or more short songs in worship services shows hospitality to people with all abilities. They are “ideal for creating opportunities for greeting and interaction,” and “since they are easily memorized, they create opportunity for movement and for interspersing Scriptures and other readings with them.”⁴

In addition, brief songs are the best songs for intergenerational worship (they are children friendly, too), and therefore, these songs can bless the entire congregation.

² See C. Michael Hawn, *Gather into One. Praying and Singing Globally*. Grand Rapids: William B. Eerdmans Publishing Company, 2003, 224-40.

³ C. Randall Bradley, *From Memory to Imagination. Reforming the Church’s Music*. Grand Rapids: William B. Eerdmans Publishing Company, 2012, 177.

⁴ Ibid, 178.

Most of our hymnals (like Glory to God) have a good selection of short songs: global songs (African songs, Latin American “coritos”), Iona’s songs (many of which are also global songs-John Bell), Taizé songs, some African American songs, among others.

Brief songs are good to use body language. As you may know, sign language is not universal. We use American Sign Language, but there are 137 sign languages across the world. This means that if we had at church individuals from minority cultures with hearing disability, ASL may be not of big help. Body language, instead, may give us a way to include people in this situation. (Example)

Lastly, lively short songs can be accompanied with small percussion instruments, which provides another good way to engage people with all abilities.

[Optional, if time allows]

This video of Action Choir singing a brief song in Calvin Worship Symposium 2017 is a great example of how people from all cultures and with all abilities can benefit from singing short songs:

<https://vimeo.com/208124652> [min.47:40 to 51:08]

Responsive Design in a Multicultural Society

Disability is a socially constructed concept. People from different cultural backgrounds may have a different understanding or concept of disability from the "mainstream" American culture. What constitutes a disability and what it means to be a person with a disability may vary across cultures.

For example, while dyslexia may be a considerable handicap in a society which relies on reading skill to be able to get a job and be a fully functional citizen, in a society where reading materials hardly exist it is not a handicap at all.⁵

As Nora Groce and Irving Zola argue: “Many ethnic and minority populations, reflecting their own unique and long-standing cultural beliefs, practices, and support systems, do not define or address disability and chronic illness in the same manner as ‘mainstream’ American culture. Their concerns are not necessarily identical, their solutions are not always the same, and the strengths shown in many ethnic and minority groups may present alternative ways of addressing needs that merit our careful attention.”⁶

Cross-cultural differences require from church leaders and worship planners to explore how different cultures view disability and why it is viewed that way. Which social norms form their opinions and attitudes? How “responsive design” may be affected when the individual with a special need is from a minority-culture?

⁵ Peter Coleridge, *Disability and Culture*, 29.

<https://pdfs.semanticscholar.org/1236/e5ba0b31063cc21e5b868b2cf02d6077a962.pdf>

⁶ Nora Ellen Groce and Irving Kenneth Zola, “Multiculturalism, Chronic Illness, and Disability.” *Pediatrics* Vol.91 No. 5, May 1993, (pp. 1048-55), 1048.

Only with a better understanding of different cultural perceptions on disabilities, we will be able to offer a responsive design that meets the needs and desires of the families and people with disabilities in a culturally appropriate way.

A main obstacle that keeps persons with disabilities from participation in worship are attitudinal barriers. They include misconceptions about the concept of disability, stigma and prejudice keep persons with disabilities from contributing significantly to or even being involved in their religious communities.

1. Culturally Perceived Causes of Disability

The culturally perceived cause of a disability can seriously influence how family members and cultural/ethnic communities respond to individuals with disabilities and how these individuals with a certain disability see themselves in the light of these beliefs. The culturally perceived causes of disability may also influence theological beliefs in regards to God and disabilities, and may create different expectations on church's responses to their specific needs.

In some cultures, disability is considered as a form of punishment, either for ancestral wrongdoing, or parental dishonesty or misconduct. In some other cultures, the result of sin or promiscuity of the mother, an ancestral curse or a witchcraft, or demonic possession.⁷ In some others, an act from God.

Except for the last case, in all the other perceived causes of a disability, the family or the individual who is disabled is held accountable for his or her own problems. "As a consequence, members of a particular [cultural] community may hesitate to respond to requests to provide assistance or permit social integration."⁸

In some cultures, some disabilities are more 'acceptable' than others. For example, according to a study on Asian cultures, Peter Coleridge claims [that] "Amputees, partly because their ability to communicate and reproduce is not impaired and partly because they may be regarded as having made a sacrifice in war, are easily accepted. Other disabilities, especially congenital ones, are often regarded as a shame, and are largely absent from public view."⁹

2. Stigma

Negative attitudes and erroneous beliefs about disability can result in stigma (an undesirable or discrediting attribute). "For persons with disabilities and their families, stigma often results in a lowering of status within the community. Stigma in turn can lead to discrimination against a person with a disability, a family member, or someone associated with a person with a disability. . . .At the individual

⁷ African Child Policy Forum, *Violence against Children with Disabilities in Africa: Field Studies from Cameroon, Ethiopia, Senegal, Uganda and Zambia* (2011).

⁸ Groce and Zola, 1050.

⁹ Coleridge, 37-38

level, stigma and discrimination against persons with disabilities can also result in internalized oppression and feelings of shame.”¹⁰

These views present a great contrast with the American dominant culture, for which “Disability is a part of life and everything happens for a reason so the causes do not matter- the conditions are set and humans must just deal with it.” As you may note, the mainstream American perspective favors “responsive design” in contrast to some minority-cultures understandings.

3. “Familialism” and family-role expectations

Certain cultures are strongly group-oriented. The family unit tends to be large, to include the extended family, and family members are close-knit. It is not uncommon for three generations to live in the same household or nearby each other. Sometimes, this concept of family includes even very close friends. This understanding implies a strong sense of inside/outside. Inside the family system, there is a high expectation of solidarity and intense loyalty, while those people outside of the family unit are often slow to be trusted.

This “familialism” can translate into supportive attitudes and behavior from the nuclear and the extended family towards the family member with a disability. In general, this support from family is positive though it can turn to “overprotectiveness,” and result in under-stimulation, and ignorance of how to help the child develop.”¹¹

The American ideal of independence from family is not compatible with this cultural belief system, where interdependence is valued over autonomy. This feature may be negatively perceived by the American dominant culture as ‘dependence.’¹²

In responsive design, it is important to understand family dynamics and values.

[Example. An anglo- family in a dominant American culture church has children with a severe mental disability... child taken care behind a glass wall. Contrast this story with how the same response might looked like for people coming from a community-oriented culture]

4. Gender roles

Gender roles are cultural constructions and can determine which family members provide care to a member of the family with a disability. In traditional societies, women tend to be seen as nurturers. Therefore, women are expected to give care to the young, ill, elderly, and family member with a disability.

In their study on Latino cultural values and disabilities, Zea, Quesada and Belgrave, address a different aspect of gender-role expectations. They talk about Latina women and the cultural assumption

¹⁰ <http://www.un.org/esa/socdev/documents/disability/Toolkit/Cultures-Beliefs-Disability.pdf>

¹¹ Coleridge, 37.

¹² See Zea, Quesada, and Belgrave, 192.

that women are supposed to endure (“aguanta”r). “Tolerating adversity is considered an important positive quality for Latina women.”¹³ This attitude may help to a positive adaptive response to a disability, but it may also lead to denial or resignation, preventing women from asking church support, for themselves or for a family member with a disability.

Yet, in general, in minority cultures it is more acceptable for women to need help than for men. In conservative cultures, “manhood” tends to be associated to a provider role, and or, physical strength, and or, procreators of large families. In these cultures, as David Gilmore says, “true manhood is a precious and elusive status beyond mere maleness, a hortatory image than men and boys aspire and that their culture demands of them as a measure of belonging.”¹⁴

Therefore, if a male’s disability prohibits him from taking care of his family, his status is hurt. In cultures with this kind of understanding of manhood, males may have serious difficulties in accepting disability. Disability may be denied or minimized as long as they can function within these roles.¹⁵

Even though we may somehow disagree with these gender images, in a culture- sensitive responsive design, we need to be aware of cultural differences regarding gender roles, and be respectful of other people’s culture (which is not the same to validate these views).

Final suggestions:

1. Intend to have a reasonable understanding of the individual’s culture
2. Try not “knowing about” the individual’s culture, but “learning from” the individual (family): listening and giving prominence to the individual’s story, a narrative that is unique. Cultural knowledge cannot be learned abstractly. “We learn about culture not primarily by learning ‘facts’ of another’s culture, but rather by changing our attitude. Our underlying openness to those who are culturally different is the key to cultural understanding.” (McGoldrick et al, 2005, p.5).¹⁶

¹³ Comas-Días, 1989, quoted in Zea et al., 193.

¹⁴ David Gilmore, *Manhood in the Making: Cultural Concepts of Masculinity*, New Haven: Yale University Press, 1990, 17.

¹⁵ See Zea et al., 193.

¹⁶ McGoldrick, M., Giordano, J., & Garcia-Preto, N. (Eds.), *Ethnicity and family therapy* (3rd ed.). New York: Guilford Press, 2005.